

MAY 25 2005

TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Mail Stop **AMENDMENT**

Application Number	<b>09/751,231</b>
Filing Date	<b>December 29, 2000</b>
First Named Inventor	<b>Richard N. ELLSON</b>
Art Unit	<b>1639</b>
Examiner Name	<b>My Chau T. TRAN</b>
Attorney Docket Number	<b>7610-0040</b>

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> No fee due <input type="checkbox"/> Fee Transmittal <input checked="" type="checkbox"/> Fee(s) due <input checked="" type="checkbox"/> Fee Transmittal <input checked="" type="checkbox"/> Check for \$60.00 <input checked="" type="checkbox"/> Charge any underpayment or credit any overpayment to Deposit Account No. 18-0580 <input checked="" type="checkbox"/> Return postcard <input checked="" type="checkbox"/> Amendment/Reply – 15 PAGES <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request – 1 MONTH <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement & Form(s) PTO-1449 <input type="checkbox"/> Copy(ies) of cited reference(s) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s):	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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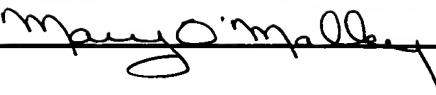
## Remarks:

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name (print/type)	<b>Flavio M. Rose, Reg. No. 40,791 Reed Intellectual Property Law Group</b>	Telephone	<b>(650) 251-7700</b>
Signature		Date	<b>May 23, 2005</b>

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Name (print/type)	<b>Mary O'Malley</b>		
Signature		Date	<b>May 23, 2005</b>